## FEC FORM 9 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations  (a) Name	
(b) Address (number and street)	2. FEC Identification Number
(c) City, State and ZIP Code WASHINGTON DC 20036	C C00000000
(d) Name of Employer or Principal Place of Business (e) Occupation	
New  3. Is This Statement or 4. Covering Period	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3. Is this statement or 4. Covering Period	through  M M / D D / Y Y Y  0.5 2.5 2.01.0
5. (a) Date of Public Distribution(s) $^{\text{M}}_{0}$ $^{\text{M}}_{0}$ $^{\text{M}}_{0}$ $^{\text{D}}_{2}$ $^{\text{D}}_{2}$ $^{\text{D}}_{2}$ $^{\text{Y}}_{2}$ $^{\text{Y}}_{0}$ $^{\text{Y}}_{0}$ (b) Communication Title Listen Bonner	
6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)	
(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15	
(e) Other, specify:	
7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?	
8. Custodian of Records	
(a) Name Amy Kurtz	
(b) Address (number and street)	
1201 16th Street NW (c) City, State and ZIP Code	
Washington DC	20036
(d) Name of Employer or Principal Place of Business	(e) Occupation
NEA, Washington DC	Manager
9. Total Donations This Statement	.00
10.Total Disbursements/Obligations This Statement	26362.00
Under penalty of perjury, I certify that this statement is true, correct and complete.	
TYPE OR PRINT NAME OF PERSON COMPLETING FORM  Amy Kurtz	
SIGNATURE Electronically Filed by Amy Kurtz	DATE05/26/2010